DOCUMENT RESUME

ED 087 180 EC 061 219

AUTHOR	Mather, June
TITLE	Make the Most of Your Baby.
INSTITUTION	National Association for Retarded Citizens, Arlington, Tex.
SPONS AGENCY	Civitan International, Birmingham, Ala.
PUB DATE	Jan 74
NOTE	22p.
EDRS PRICE	MF-$0.65 HC-$3.29
DESCRIPTORS	Child Rearing; *Exceptional Child Education; Individual Activities; Infancy; *Mentally Handicapped; *Parents; *Play; Teaching Methods
IDENTIFIERS	*Infant Stimulation

ABSTRACT

Written for parents by the mother of two mentally retarded children, the booklet explains what it means to be mentally retarded and emphasizes the importance of play to aid speech development and walking. Parents are advised to set realistic goals and to encourage the child in learning social skills. Mental retardation is described in relation to slower than average development, parental awareness of developmental sequences, and during teaching of skills. Noted is the importance of a mother's understanding that she is constantly teaching when she plays with her child. Directions are given for stimulation of the infant's reactions and for teaching early speech patterns. Suggested for eventual walking are activities such as providing stimulating objects to strengthen eye muscles, playing games like "This Little Pig Went to Market", and handling the child in ways that teach him about himself and help him lose fears. (HC)

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION
THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

ED 087180

.40

MAKE the MOST of YOUR BABY

by June Mather

A Booklet for Parents of Mentally Retarded Infants and Preschool Children.

EC 061 219

This booklet
was published
by the National Association for Retarded Citizens
in January of 1974
as part of an ongoing public information program
made possible by a grant
from the
CIVITAN CLUBS OF NORTH AMERICA,
including their junior and collegiate affiliates.

To Alan and Ann.

Preface

June Mather wrote "Make the Most of Your Baby" from her own personal standpoint as the mother of two mentally retarded children. It also reflects the more than 20 years' experience she has had in the mental retardation field.

Her thesis is that children learn from play. "Make the Most of Your Baby" shows how parents can provide meaningful play experiences for their mentally retarded infant by being aware of the sequential nature of early childhood development.

As one mother has said, "The most obvious question and the most difficult one a parent of a mentally retarded infant asks is, 'How do we work with the child and help him?'"

Mrs. Mather tells how and points out the importance of it. She also stresses that time and patience are needed in working with a retarded child.

Her manuscript's value to other parents who have just been told that their infant is retarded is obvious. It is for this reason that the National Association for Retarded Citizens is grateful to Mrs. Mather for her donation of "Make the Most of Your Baby" for publishing. The National Association for Retarded Citizens also thanks the Civitan Clubs of North America, including their junior and collegiate affiliates, for providing the funds necessary to publish it.

Introduction by Rene Mather

When we were first told that our baby was mentally retarded, our reaction was to ask for medicine to cure this disease.

In reply, our doctor stressed the fact that no medication could cure mental retardation. A very wise man, he tried to explain to us that, unlike a curable disease, mental retardation is a condition that results in a slower than average rate of development. And he drew us a graph to illustrate his point.

Somehow, it was difficult to see the relationship between the graph he drew and the little scrap of humanity I was holding in my arms.

My husband and I came away with the impression that the only thing we could do as parents was accept the situation as gracefully as possible.

In our bewilderment, we found we were unable to ask all the questions that crowded in on us. If the doctors could not cure our child, who could we turn to for help? Could anyone help a mentally retarded child? What does it mean to be mentally retarded?

There was something about the phrase "mentally retarded" that frightened and upset us even more than the unfamiliar disease* which, we learned later, was the cause of our baby's condition. As a matter of fact, there was a curious relief in knowing that there was a medical reason why our child lagged behind other children his age. There was also a curious relief in realizing that we now knew the worst, and that if in time we could face up to this moment — if we could accept this truth — then nothing in the future would ever be quite so difficult for us to cope with.

Now we could begin to ask questions like: Will this happen to other children we may have in the future? Why did this happen to us? Could we have done anything to prevent it from happening? Is it hereditary? Is it our fault? and so on. Some of these questions could be answered right away now that we knew what was wrong with our child. Some will be answered in the future. And some may never be answered.

We discovered later that there are more than 200 known causes for mental retardation. However, these causes account for only about a fourth of all identified cases of mental retardation.[1] So there are still

* *The disease was called lipochondrodystophy. However, that was in 1951 and very recently – in fact, since this booklet was written – new medical research has discovered a chromosome imbalance which seems to be the most likely cause of the mental retardation.*

---

[1]National Association for Retarded Citizens (NARC), *Facts on Mental Retardation*, a fact sheet (Arlington, Texas: NARC, 1973).

many parents who do not know exactly why their children are mentally retarded.

All this happened to us more than 20 years ago, when somehow it was still considered shameful to have a mentally retarded child. Fortunately this old-fashioned attitude has almost disappeared. People, for the most part, are now far more understanding and sympathetic. But the bewilderment of parents continues, so this booklet is written in the hope that it will answer two major questions:

1. What does it mean to be mentally retarded?
2. How can we help our mentally retarded child?

The first section of the booklet attempts to answer the first question so that parents themselves can explain what it means to their relatives and friends.

The last section is a review of some of the latest theories about how children learn and develop in the first few years of life. It emphasizes how these theories can be used by parents of mentally retarded children. This last section is divided into three parts:

1. The Importance of Play.
2. The Beginning of Speech.
3. First Steps to Walking.

There are many ways to measure success in life. Unfortunately, to most people it means material gain, intellectual prowess or creative achievement. But when a person becomes all he *can* become, that can also be the measure of a successful life.

Parents can set no higher goal for their retarded child than to use what he *can* do as the basis for a program which will equip him to handle, as best he can, the day-to-day business of living. A program that will concentrate on improving those skills he *can* do has the advantage of giving both parents and child a positive and successful attitude. This will contribute to the child's feeling of well-being and will show itself in his behavior. The child who is constantly made to feel incapable by parents and teachers who push him beyond his ability is bound to feel insecure and frustrated, and his behavior will be affected. It has been found that it is antisocial behavior that singles out the retarded child far more than his lack of intellectual ability.[2]

It appears then, that the goal parents should strive for is to improve the personality of their retarded child. Parents should recognize that how successful the mentally retarded person will be in life depends upon his disposition (it should be pleasant) and his ability to get along with other people.

---

[2]Julian U. Stein, "Motor function and physical fitness of the mentally retarded," *Rehabilitation Literature*, (August, 1963), p. 239.

"...it is through his play experiences that a child learns."

What does it mean?

I have often wondered why we were so shocked when the doctor first used the expression "mentally retarded" to describe our baby. Perhaps it was partly because it confirmed suspicions we had hidden even from ourselves. And also partly because mental retardation is so hard to understand and even harder to explain.

Even the fact sheet of the National Association for Retarded Citizens is somewhat vague in its description of "a condition where the brain is prevented from attaining full development, limiting the . . . ability to learn and put learning to use."[3] How could this help us understand our baby?

We can understand what it must be like not to be able to hear, because we can put our fingers in our ears and experience a deaf person's world. And we can close our eyes and know for a moment how it is to be blind. But what can we do to understand the world of a mentally retarded person?

We got out the scrap of paper and examined the graph our doctor had drawn for us. The doctor had plotted the actual age of our child against his mental or functional age and compared this with the graph of an average child.

It was becoming clear that the phrase "mentally retarded" is used to describe those who function at an age lower than their actual or chronological age. These are children who develop at a slower rate than average. They may take two or three or even more years to develop as much as an average child does in one year.

However, development — whether it is slowed down (i.e., retarded) or whether it takes place at the average rate — is not a haphazard affair. All children go through the same sequences of development.*

A mentally retarded child is simply going to spend much more time at each developmental stage or level. He is going to spend much more time at the developmental stages of the pre-school or early childhood years.

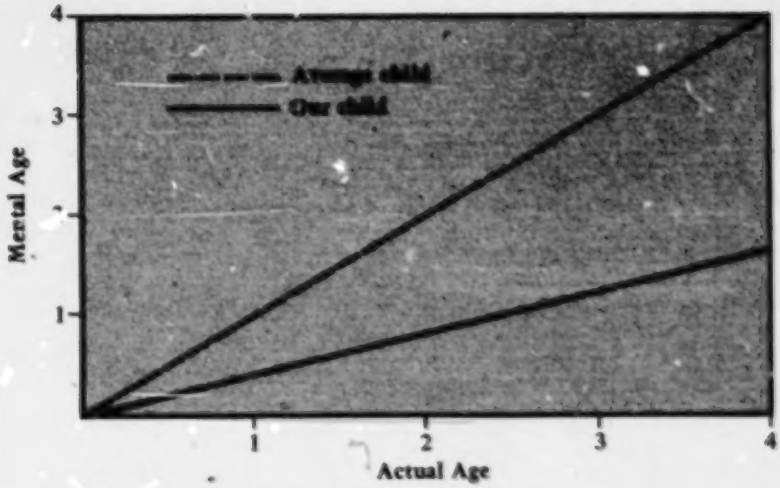
Dr. Arnold Gesell, who founded the Clinic of Child Development at Yale University, spent many years studying children in the first few years of life.[4] From these observations he has traced the stages of development. These stages are rather like stations along a railway line,

* *The idea of sequential development is a widely accepted one. However, it must be pointed out that even among the experts there are differences of opinion about exactly which skill or activity follows another.*

---

[3] National Association for Retarded Citizens (NARC), *Facts on Mental Retardation, a fact sheet* (Arlington, Texas: NARC, 1973).

[4] Arnold Gesell, Henry M. Halverson, and Frances L. Ilg. *The First Five Years of Life* (New York: Harper and Row, Inc., 1940), p. 13.



and development is much like a train that takes a child from infancy to childhood. The train may move very fast or, as in the case of mentally retarded children, it may go quite slowly. It may spend a long time at each stage or it may spend only a moment there.

An understanding of the orderly sequence of development that takes place in the early years will help parents (or teachers for that matter) to lead their mentally retarded child from one stage to the next.

A parent's gentle leadership can help these children accomplish more complicated skills. This requires taking very small steps toward new skills — and constantly going back to stages already reached and skills already established. If the early stages are missed or skipped, the child may balk at the harder tasks, become frustrated, or regress to an earlier level. The path of development for the mentally retarded child is rough and rocky. Those who want to help should do what they can to smooth it out for him.

The most obvious changes that take place in the early years are in the developmental stages that lead to walking and talking. These stages are of particular importance for parents of the mentally retarded youngster, because these children will spend a longer time learning to walk and talk properly. In the next part of this booklet, we will take a closer look at the sequences of development that lead to walking and talking.

The importance of play

Twenty years ago, few mothers realized that when they played with their babies, they were actually *teaching* them.

For my part, when I was a young mother, it never occurred to me that it was necessary for infants to be taught. I thought that growth and development were things that just naturally happened, so long as we gave our baby a proper diet, clean clothes, fresh air and plenty of rest. My husband and I played with our baby, of course, but we thought of this as simply part of the fun of being parents. The idea that when we played with him we might be helping his growth and development, or in other words, *teaching* him, never crossed our minds. This was a pity, because being the parents of a child whose development was slow, we needed to understand how to help him even more than parents of average children.

In the past few decades, there has been a great deal of research into the question of development in the early childhood years. But only recently are results of this kind of research beginning to reach into our everyday world. Headlines such as "Infants Learn at Two Weeks" appear in our local newspapers.[5] Toys are labeled with an age range, so that even a novice father has no excuse for arriving at the hospital with a baseball and a catcher's mitt for his newborn baby boy.

Mothers of today are far more understanding of their infants' needs, but they still have much to learn. At a recent symposium for experts such as pediatricians, educators, psychologists and child developmentalists, one of the suggestions made was that centers be set up where parents can be taught how to play with their children.[6]

These experts were talking about how play affects average children. It seems to me, however, that it is of even greater importance to know how play can help in the development of a mentally retarded child.

Play has been called the work of childhood and it is now recognized that it is through his play experiences that a child learns.[7] He learns by seeing, hearing and feeling, and gradually he gets to know himself, his world and the people in it.

All learning begins somewhere. No one begins arithmetic with long division, no one starts reading with Shakespeare. But it is sometimes

---

[5]Steven A. Tragach. "Infants learn at two weeks," *The Norwalk Hour*, April 14, 1971, p. 12.

[6]American Association for Health, Physical Education, and Recreation, *Perceptual-Motor Foundations: A Multi-disciplinary Concern*, Proceedings of the Perceptual-Motor Symposium, (Washington D.C.: AAPHER, 1969), p. 140.

[7]Jerome S. Bruner. *Toward a Theory of Instruction* (Cambridge: Harvard University Press, 1966), p. 135.

"...a mother can enrich her baby's world – by providing him with stimulating objects."

quite difficult to find the beginning of things, rather like trying to find the beginning of a ball of yarn. Where, for instance, does speech begin? What are the first steps to walking?

There is no problem for the child who walks and talks at about the same time as do most other children. But for the child like ours who is unable to do these things in due time, it is important that the parents find the beginning — so that they will know where to start teaching, how to prepare him, how to make him as ready as possible. For the mentally retarded child, walking and talking are rather like long division and Shakespeare. Before the mentally retarded child can attempt them, there are a series of simple things he should be able to do.

The beginning of speech

Right from the start, babies seem to be aware of how to attract attention; the strength and loudness of their cry seems quite out of proportion with their tiny size. Perhaps this is nature's way of insuring the survival of the most helpless of all newborn creatures, the human baby. Attention frequently means food . . . if only to stop the crying. In order to feed her baby, a mother has to hold him close, and the comfort and warmth of this contact becomes a delight for the child even after his hunger has been satisfied.

These moments of shared enjoyment are the moments of play. A mother may stroke her baby's cheek, smile at him in love, kiss him, coo at him, sing to him, tickle his tiny feet, have him clutch her little finger with his hand, rock him back and forth and so on. All for "fun." And yet only partly so, for a mother in doing these things is actually trying to elicit a response from her baby. Soon her reward comes. He smiles at her. Through play she has taught him to smile. The smiling response is an infant's first expressive act of communication, his awareness of the bond between himself and his mother.[8]

When a mother sees her baby smiling, she indicates her delight in his response. She "tells" him not so much in words as in the sound of pleasure in her voice, the smile upon her face and the increased warmth from her body as she cuddles him closer to her — all in response to his behavior. Small wonder that he in turn becomes aware of her approval and smiles even more. This is what teaching is all about; this is how it is possible to teach children even when they are tiny babies.

Not many mothers, enjoying these happy moments, think of themselves as *teachers*. Yet the baby's smile is an indication that he has learned one of his very first lessons. He has learned that he is able to do the same thing that somebody else does . . . he has learned to imitate. And imitation of other people's sounds, gestures and facial expressions is the basis of communication — of speech. The smile is the beginning of that unique human quality, the ability to talk.

Speech may very well start with the smiling response, but obviously smiling is a long way from talking. There are many intermediate stages to go through before a child is ready to begin using words. The idea of "readiness" is important because unless a child is *ready* to begin learning a certain skill, there is no point in trying to teach him that particular skill. In other words, there is no point in teaching a child to talk unless he is physiologically and psychologically mature enough to be able to do so.[9]

---

[8]Martin Grotjahn. *Beyond Laughter* (New York: McGraw-Hill Book Company, 1957), p. 73.

[9]Clifford T. Morgan and Richard A. King. *Introduction to Psychology* (3rd ed. New York: McGraw-Hill Book Company, 1966), p. 52.

In the past, this has given rise to the attitude that readiness is something you simply have to sit and wait for. In the case of the mentally retarded child, this may mean waiting for a very long time. However, Professor Jerome Bruner of Harvard's Center for Cognitive Studies has shed new light on the idea of readiness by stating: "Readiness consists of mastery of those simple skills that permit one to reach higher skills."[10]

If we think of talking as a higher skill, then readiness for it consists of mastery of those simple skills that lead to talking. What are these simple skills? How is it possible to master them?

Starting with the smiling response there are various stages a child goes through before he is ready to begin talking. He bubbles and coos, he gurgles and laughs, and then he begins to crow and squeal. Next he begins experimenting with vowel sounds, and then consonant sounds, and next syllables and diphthongs. Then he explores the possibilities of making new sounds with his tongue and lips. He babbles incomprehensibly and makes "razzing" noises. He begins to understand the sound of his own name and he responds to simple commands.[11]

All of these vocal activities are developmental stages, and each one is a simple skill which needs to be mastered before the child is ready to begin the more complex task of actually using words.

A mother can help her baby master these skills and move from one stage to the next in exactly the same way that she "taught" him how to smile. By playing with him, responding to him and echoing the sounds he makes, she can encourage him to greater vocal activity. By mimicking her baby's sounds and then slightly changing them, she shows him how sounds can be altered. At the same time, she gets him used to the idea of listening to her voice as a means of correcting what he is trying to say.[12] This is a very important aspect of a mother's role when he begins to use words.

The mentally retarded child will spend more time than normal at these pre-linguistic stages of speech development. In fact, some never get to the stage of using words at all. So it is best to think of speech as including gestures, facial expressions, intonation and bodily movements as well as words.[13] Parents can help by encouraging their child to improve the means of communication that he *is* able to master — whether this is gesture, intonation, sound or whatever. By focusing on what he *can* do and improving it, they and he will be far less frustrated

---

[10]Bruner, *Instruction*, p. 29.

[11]Gesell, *The First Five Years*, p. 18-28.

[12]Richard L. Schiefelbusch. *Methods In Special Education* (New York: McGraw-Hill Book Company, 1967), p. 57.

[13]Ibid. p. 56.

"...the comfort and warmth... becomes a delight for the child."

than if they insist upon his using words which may be beyond his ability. In fact, a retarded child who is constantly made to feel his incapacity in this way can become so discouraged that he may refrain from all vocal play. He may refuse even to try to talk.

If a retarded child can be taught to point to something he wants and to make a sound that could be taken to mean "please" — and do it with a pleasant smile on his face — this is as important as his being able to say: "May I have a cookie (or whatever it is), please?" It is important because he has been taught how to make himself *understood*, and this is the aim of speech.

However, when a child makes a sound in place of a word, such as "ee" for "please," his mother should always repeat the word that he is attempting to say. The reason for this is, as mentioned above, that as she corrects the sounds he makes, he may then try to change his sound to conform with hers.[14]

Parents often ask whether they should use baby-talk. The question should be *how* and *when* to use it, rather than *whether* to use it. If baby-talk encourages a child to play with sounds, well and good. Sometimes, however, children are taught to use pet-names and baby-words in place of other simple, more familiar and universally understood words. This can be a real problem for the child whose speech development is retarded, because he discovers that he cannot communicate with people outside his family. He has been taught, or allowed to use, words that only his family can understand.

Better he learn well how to make his wants known by the gesture-sound-and-smile method. For above all, speech, whether it includes words or not, is supposed to make it *easier* for people to communicate together. This goal should always be kept in mind when teaching a mentally retarded person.

Another point to keep in mind is that teaching should always be an effort to take the child from the developmental stage where he is *at the moment* and to lead him to the next stage. It can be accomplished best by patience, understanding and above all, enjoyment. For as Jerome Bruner wrote: "If ever there is self-reward in process it is in the sphere of 'doing things for merriment!' "[15]

---

[14]Schiefelbusch, *Methods*, p. 57.

[15]Bruner, *Instruction*, p. 135.

First steps to walking

Because most people take their first steps very early in life, it is often hard to realize how complicated the act of walking actually is. But a simple experiment we can easily perform ourselves is to lie on the floor and then try to put into words *exactly* what happens as one gets up from this prone position and walks across the room. When I did it, I found I was having quite a lively argument with myself about whether I would get up from a sitting position — in which case my head would be the first thing I would move — or whether I would roll over and get up from my all fours! I found that in order to think about it at all, I had to visualize my whole body — had to "see" it with my mind's eye and understand how it works.

Seeing inwardly can come about only after one has had the experience of actually seeing. So it is not surprising to find that some of the very first muscles to be activated in the newborn child are the ones that control his eyes.[16]

If we think about the definition of readiness that was mentioned earlier in this booklet — how it consists of "mastery of those simple skills that permit one to reach higher skills"[17] — then it becomes clear that walking, like talking, can be thought of as a higher skill. And the simple skills that permit one to be able to walk begin with mastery of the muscles that control the eyes. Just as talking begins with the smiling response, so walking starts with the ability to see properly.

The average baby learns to see by having things to look at. He learns mastery of his eye muscles by putting them to use. The more muscles are used the more efficient they become; muscles that are not used eventually cease to function.[18] It is with these thoughts in mind that toy manufacturers have created bright-colored mobiles to place on the crib, so that the baby of a few weeks age has something to "feast" his eyes on — something to activate and put to use the tiny muscles that control his eyes.

By using these muscles again and again, the baby gradually learns how he can bring into focus his own hands and feet and the variety of other things that come into view as he is carried every day in his mother's arms.[19]

Just as a good teacher will provide her students with a proper learning environment, a mother can enrich her baby's world — by providing him with stimulating objects. These objects do not have to be expensive

---

[16]Gesell, *The First Five Years*, p. 13.

[17]Bruner, *Instruction*, p. 29.

[18]Stein, *Rehabilitation Literature*, p. 232.

[19]Maya Pines. Jerome Bruner maintains: Infants are smarter than anybody thinks, *The New York Times Magazine*, November 29, 1970, p. 117.

toys. They do not even have to be toys. In fact, they can be any everyday thing that attracts his attention and encourages him to focus his eyes so he can see it clearly.

As he develops, he learns to hold his head up in order to get a better view of the objects around him. As he reaches out his arms toward them and later moves his body to bring them close enough to grasp them in his hands, he is not only learning more about his surroundings, he is also activating the muscles that control the different parts of his body. By using his muscles he learns how to see himself and the world around him. How to focus his eyes as well as how to "see" with his mind's eye. How to develop and control his body so that one day he can get to his feet and walk.

All this applies equally to the mentally retarded baby. But parents often find — as we did — that there is a difficulty with that very first step . . . learning to see properly.

We noticed that our baby, in the first year or so, appeared to be very contented. Since then, I have heard other mothers say the same thing of their mentally retarded babies — that they are very little trouble and sleep a great deal. On the other hand, a number of mothers complain that their retarded babies are constantly fretful and restless. It seems to me that the result of these two opposite behaviors may well be the same. The contented baby has too little curiosity in the world around him so he makes no attempt to bring things into focus. The restless baby constantly switches his interest from one thing to another, so that he never has time to bring any one object into focus.

In any event, it seems that our job as parents is to find by trial and error the best way to arouse the interest of our particular child. To teach him to bring the world around him into focus. To teach him to "see" in just the same way that he was taught to smile — by playing with him. Introducing him to his hands and feet with, "This Little Pig Went to Market," for instance, and by not being afraid to repeat games like this for months and years to come. Showing him a ball or a block and then placing it in his hands, so that he can feel as well as see the shape of it. Helping him to use his index finger to point, so that he begins to distinguish between one object and another. Making sounds by banging things together. "Tossing him gently into the air and catching him, rolling him over like a ball and twirling him around" so he overcomes his fear of movement.[20] In a word, teaching him about himself and his world through play.

There is nothing new about parents playing with their babies. They have done so throughout history. But it is important for parents to

---

[20]AAHPER. *Perceptual-Motor Foundations*, p. 140.

"...to point, so that he begins to distinguish between one object and another."

understand how their mentally retarded children can learn through play.

To say that children learn through play suggests that play is really a very serious affair. However, once it becomes serious, it ceases to be play. Mentally retarded children need the fun of play even more than other children, for it is in these moments of active enjoyment that learning can take place. Parents also need the fun of play with their retarded children. They need to experience the enjoyment and delight of being mothers and fathers.

When I was a young mother, I remember thinking that I could spoil every single day if I wanted, by worrying about what might happen to my baby in the future. It also occurred to me that if I allowed this to happen, it would not only spoil my enjoyment of being a mother, it would upset the lives of all those around me, including of course the baby himself.

I did not realize at the time that if my worry and concern prevented me from playing with my baby, I might actually be hindering his development. That if my fears for the future and doubts about the present overshadowed my natural enjoyment of the baby, I might actually add to his handicap.

For, when all is said and done, babies are first and foremost babies. It is through our enjoyment of them that they learn to view the world, it is through our eyes that they will learn to see themselves. As they grow and develop and become everything that they *can* become, our greatest gift will be to see the echo of our love for them reflected in their eyes.

Bibliography

Articles

Kenney, Eleanore T. Out of the classroom: A diagnostic preschool for atypical children, *Exceptional Children*, 36(3): 194, 1969.

March, Elizabeth H. A nursery school that works on poker chips, *Chatelaine*, 25: 104, (September), 1970.

Pines, Maya. Jerome Bruner maintains, Infants are smarter than anybody thinks, *The New York Times Magazine*, November 29, 1970, p. 117.

Stein, Julian U. Motor function and physical fitness of the mentally retarded, *Rehabilitation Literature*, 24(8): 230-242, 1963.

Stein, Julian U. What research says about psychomotor function of the retarded, *Journal of Health, Physical Education, and Recreation*, 37(4): 36-40.

Tragach, Steven A. Infants learn at 2 weeks, *The Norwalk Hour*, April 14, 1971, p. 12.

Books

Auxter, David. *Developmental Physical Training for Better Motor Functioning*, experimental ed. Pennsylvania: Western Pennsylvania Special Education Regional Resource Center, 1969.

Barsch, Ray M. Six factors in learning, in Helmuth, Jerome. *Learning Disorders*. Vol. I, Seattle, Washington: Special Child Publications, 1965, pp. 329-343.

Berieter, Carl and Seigfried Engelmann. *Teaching Disadvantaged Children in Preschool*. New Jersey: Prentice-Hall Inc., 1966.

Breckenridge, Marion B., and Margaret N. Murphy. *Growth and Development of the Young Child*, 6th ed. Philadelphia: W. B. Saunders Company, 1958.

Bronfenbrenner, Urie. *Two Worlds of Childhood*. New York: Russell Sage Foundation, 1970.

Bruner, Jerome S. *Toward a Theory of Instruction*, Cambridge, Massachusetts: Harvard University Press, 1966.

Carlson, Bernice Wells, and David R. Gingland. *Play Activities for the Retarded Child*. New York: Abington Press, 1961.

Cazden, Courtney B. *Infant School*. Newton, Massachusetts: Education Development Center, Inc., 1969.

Central Advisory Council for Education. *England-Children and their Primary Schools*. Vol. I, London: Controller of her Majesty's Stationery Office, 1967.

Cruickshank, William M., and James L. Paul, and John D. Junkala. *Misfits in the Public Schools*. New York: Syracuse University Press, 1969.

Cruickshank, William M., et. al. *A Teaching Method for Brain-Injured and Hyperactive Children*. Syracuse: Syracuse University Press, 1961.

Delacato, Carl H. *A New Start for Children with Reading Problems*, New York: David McKay Co., Inc., 1970.

Dunsing, Jack D., and Newell C. Kephart. Motor generalizations in space and time. in Helmuth, Jerome. *Learning Disorders*. Vol. I, Seattle, Washington: Special Child Publications, 1965, pp. 77-121.

Frostig, M., and D. W. Lefever, and J. R. B. Whittlesey. *The Marianne Frostig Developmental Test of Visual Perception*, Palo Alto, California: Consulting Psychologists Press, 1964.

Frostig, Marianne, and David Horne. An approach to the treatment of children with learning disorders. in Helmuth, Jerome. *Learning Disorders*. Vol. I, Seattle, Washington: Special Child Publications, 1965, pp. 293-305.

Geesell, Arnold, and Henry M. Halverson, and Frances L. Ilg. *The First Five Years of Life*. New York: Harper and Row, Inc., 1940.

Getman, Gerald. The visuomotor complex in the acquisition of learning skills. in Helmuth, Jerome. *Learning Disorders*. Vol. I, Seattle, Washington: Special Child Publications, 1965, pp. 49-76.

Grotjahn, Martin. *Beyond Laughter*. New York: McGraw-Hill Book Company, 1957.

Haring, Norriss, and Richard L. Schiefelbusch, eds. *Methods in Special Education*. New York: McGraw-Hill Book Company, 1967.

Karpovich, Peter V. *Physiology of Muscular Activity*, 6th ed. Philadelphia: W. B. Saunders Company, 1965.

Kephart, Newell. *The Slow Learner in the Classroom*. Columbus, Ohio: C. E. Merrill Books, Inc., 1960.

Morgan, Clifford T., and Richard A. King. *Introduction to Psychology*, 3rd ed. New York: McGraw-Hill Book Company, 1966.

Perceptual-Motor Foundations: A Multi-disciplinary Concern, Proceedings of the perceptual-motor symposium. Washington, D.C.: American Association for Health, Physical Education, and Recreation, 1969.

Porter, Lorena. *Movement Education for Children*. Washington, D.C.: A Study Action Publication, 1969.

Radler, D. H., and Newell C. Kephart. *Success Through Play*. New York: Harper and Row, 1960.

Rosenblith, Judy F., and Wesley Allinsmith, eds. *The Causes of Behavior*, 2nd ed. Boston: Allyn and Bacon, Inc., 1969.

Others

Armington, David E. *A Plan for Continuing Growth*. unpublished dissertation, Newton, Massachusetts: Education Development Center, 1969.

Approaches to Perceptual-Motor Experiences. Washington, D. C.: American Association for Health, Physical Education and Recreation, April, 1970.

"...our
greatest gift
will be
to see the echo
of our love..."

About the Author

June Mather, author of "Make the Most of Your Baby," resides in Wilton, Conn.

She wrote "Make the Most of Your Baby" as part of her work for a bachelor's degree, which she received in 1971 from Goddard College in Vermont.

Mrs. Mather was born and reared in England. While a WAAF during World War II, she met her husband, Leslie, then a pilot for the Royal Canadian Air Force.

They came to the United States in 1946 and lived in suburbs of Chicago for the next 15 years. During this time, she was a member of the Valley Parent Group for Exceptional Children in Batavia, Illinois.

Later, her husband was transferred to New York, and they moved to Connecticut.

For the past 10 years, she has been on the teaching staff of the Society to Advance the Retarded (STAR) in Norwalk, Conn. She is in charge of an experimental preschool for children with developmental disabilities and she teaches retarded adults in evening classes. Mrs. Mather also has worked with groups of mildly and moderately retarded schoolchildren in recreation and summer day-camp programs.

Her husband, who formerly was in advertising, now has a real estate office in Wilton.